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**UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF CALIFORNIA**

STEFANIE BECERRA,  <p style="text-align: right;">Plaintiff,</p> <p style="text-align: center;">v.</p> ALLSTATE NORTHBROOK INDEMNITY COMPANY,  <p style="text-align: right;">Defendant.</p>	
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Case No. 22-cv-00202-BAS-MSB

**ORDER GRANTING PARTIAL  
MOTION TO DISMISS (ECF No. 5.)**

Before the Court is Defendant Allstate Northbrook Indemnity Company (“Allstate”)’s motion to dismiss Count 1 of Plaintiff Stefanie Becerra (“Becerra”)’s Complaint (Compl., Ex. A to Not. of Removal, ECF No. 1-2).<sup>1</sup> (Mot., ECF No. 5; Mem., ECF No. 5-1.) Specifically, Allstate moves to dismiss Becerra’s breach of contract claim pursuant to Federal Rule of Civil Procedure (“Rule”) 12(b)(6). (*See* Mot. at 1.) Becerra opposes (Opp’n, ECF No. 6) and Allstate replies (Reply, ECF No. 7). The Court finds this Motion suitable for determination on the papers submitted and without oral argument. *See* Fed. R. Civ. P. 78(b); Civ. L.R. 7.1(d)(1). For the reasons explained below, Allstate’s Motion is **GRANTED**.

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<sup>1</sup> All exhibits are annexed to the Complaint at ECF No. 1-2.

1 **I. BACKGROUND<sup>2</sup>**

2 **A. Accident**

3 This action stems from Becerra’s involvement in a two-car accident with an  
4 uninsured driver on December 29, 2015. (*See* Compl. ¶ 5.) Becerra was stopped at an  
5 intersection when the uninsured driver, who was being chased by police, struck her vehicle  
6 from behind. (*See id.*) The crash totaled Becerra’s vehicle and caused her to sustain neck  
7 and back injuries. (*See id.*)

8 **B. Policy**

9 At the time of the accident, Becerra was insured under an Allstate automobile policy  
10 (“Policy”), which included uninsured motorist bodily injury (“UM”) coverage with a  
11 policy limit of \$25,000. (Compl. ¶ 6.) A copy of that Policy is annexed as Exhibit 1 to the  
12 Complaint. (Policy, Ex. 1 to Compl.) In pertinent part, the Policy states:

13 If you and [Allstate] disagree on your right to receive any damages or on the  
14 amount of damages, then upon written request of either party, the  
15 disagreement will be settled by a single neutral arbitrator.

16 If arbitration is used, any arbitration award will be binding up to your policy  
17 limits and may be entered as a judgment in a proper court. All expenses of  
18 arbitration will be shared equally. However, attorney fees and fees paid to  
19 medical or other expert witnesses are not considered arbitration expenses and  
are to be paid by the party incurring them.

20 (*Id.* at 44.)

21 **C. Claim**

22 On February 11, 2016, Becerra made a UM claim. (*See* Compl. ¶ 7.) In  
23 approximately November of 2016, when she had substantially completed medical  
24 treatment for the injuries she sustained from the accident, Becerra’s attorney sent Allstate  
25 a formal demand for payment of the Policy limit. (*See id.* ¶ 8.)

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27 <sup>2</sup> All of these facts are taken from the Complaint. For purposes of this Motion, the Court accepts  
28 all the factual allegations therein as true. *See Safe Air for Everyone v. Meyer*, 373 F.3d 1035, 1039 (9th  
Cir. 2004).

1           Becerra alleges that on December 23, 2016, nearly one year after Becerra initiated  
2 her UM claim but just one month after Becerra’s attorney’s formal demand, Allstate made  
3 an offer of \$7,000 to settle. (*See* Compl. ¶ 9.) Becerra responded on January 24, 2017,  
4 with a formal demand for arbitration. (*See id.*) Allstate did not respond to Becerra’s  
5 demand, prompting her to send Allstate a second demand for arbitration, along with a list  
6 of potential arbitrators, on March 14, 2017. (*See id.*) Again, Allstate did not respond, so  
7 Becerra wrote to Allstate’s in-house counsel, “asking to set arbitration after [Becerra’s]  
8 deposition which was noticed for June 1, 2017.” (*Id.*) On May 2, 2017, Allstate  
9 acknowledged Becerra’s arbitration demand, indicating arbitration would be set. (*See id.*)

10           Becerra’s deposition went forward as scheduled. (*See* Compl. ¶ 10.) In connection  
11 with the arbitration, Allstate retained Raymond Vance, M.D. (“Dr. Vance”) to conduct a  
12 defense medical examination of Becerra. (*See id.*) According to Becerra, Dr. Vance  
13 concluded “the entirety of [Becerra’s] care was reasonable and necessary.” (*Id.*) Following  
14 the medical examination, Becerra made another demand for payment of the full Policy  
15 limit. (*See id.*) On February 14, 2018, Allstate returned with a “final” offer of \$10,000.  
16 (*Id.*) Becerra rejected Allstate’s offer and made another request to proceed with arbitration.  
17 (*See id.*) The parties considered potential arbitrators but could not agree upon whom to  
18 choose. (*See id.*) Becerra avers that Allstate “insisted on using arbitrators who required  
19 exorbitant administrative costs and fees,” and that she refused to use such arbitrators unless  
20 Allstate incurred the cost of the arbitration. (*Id.*) Unable to reach an agreement as to an  
21 arbitrator, Becerra served a formal “998 settlement offer” for \$17,500, which Allstate  
22 rejected. (*Id.* ¶ 11.)

23           According to Becerra, arbitration stalled for approximately one year because  
24 Allstate’s “in-house attorney” handling the matter purportedly “had a conflict of interest,”  
25 requiring him “to withdraw as counsel” and prompting Allstate to obtain a replacement.  
26 (Compl. ¶ 12.) To no avail, the parties continued to suggest to one another proposed  
27 arbitrators from approximately August of 2019 until March of 2020. (*See id.* ¶¶ 14–15.)  
28

1 Finally, on March 10, 2020, Allstate agreed to move forward with one of Becerra’s  
2 proposed arbitrators. (*See id.* ¶ 15.)

3 Formal arbitration was conducted in August and November of 2020, resulting in an  
4 award “against [Allstate] in the sum of \$78,086.93,” more than \$50,000 in excess of  
5 Becerra’s Policy limit. (Compl. ¶¶ 8, 17.) Allstate paid Becerra \$25,000—her Policy  
6 limit—on December 1, 2020. (*Id.* ¶ 17.) Additionally, Becerra asked Allstate to pay her  
7 arbitration costs and fees “[b]ased upon the amount of the award,” in excess of the Policy  
8 limit, which Allstate has refused to do. (*Id.*)

#### 9 **D. Present Action**

10 Becerra commenced this action against Allstate in San Diego Superior Court on  
11 September 23, 2021, alleging breach of contract (Count 1) and breach of the implied  
12 covenant of good faith and fair dealing (Count 2). (*See* Compl. ¶¶ 18–31.) Allstate  
13 removed this action to federal court on the ground that there is complete diversity between  
14 the parties and the amount in controversy exceeds \$75,000, exclusive of costs and interests.  
15 (Not. of Removal ¶ 9 (citing 28 U.S.C. § 1441)); *see also* 28 U.S.C. §1332 (diversity  
16 jurisdiction statute).

17 As to Count 1, Becerra alleges Allstate breached the Policy

18 by failing to pay [UM] benefits . . . in a reasonably prompt fashion; by making  
19 unreasonable lowball offers of settlement throughout the handling of  
20 [Becerra’s] insurance claim; by unreasonably forcing [Becerra] to complete  
21 the [UM] arbitration process, even though it was reasonably clear . . .  
22 [Becerra’s] claim was a policy limit case; by unreasonably and greatly  
23 delaying the arbitration process for four years; by failing to conduct a  
24 thorough and reasonably prompt investigation following [Becerra’s]  
25 presentation of her UM claim . . .; and by otherwise unreasonably and  
26 unlawfully delaying the resolution of [Becerra’s] [UM] claim.

27 (Compl. ¶ 22.) Becerra avers that as a “direct” result of Allstate’s breach of contract, she  
28 “suffered damages under the [Policy] in an amount in excess of \$25,000.00.” (*Id.* ¶ 23.)

Count 2—Becerra’s claim of breach of the implied covenant of good faith and fair  
dealing—is predicated upon substantially the same theory as Count 1: Allstate’s

1 purportedly unreasonable delay in performing its obligations under the Policy. (*See*  
2 Compl. ¶¶ 24–31.) However, Becerra seeks additional types of damages under Count 2,  
3 namely, compensation for severe and substantial emotional distress, mental anguish, and  
4 suffering; attorney’s fees, costs, and expenses incurred in obtaining the Policy benefits  
5 from Allstate; and exemplary and/or punitive damages. (*Id.* ¶¶ 29–31.)

6 On April 14, 2022, Allstate moved to dismiss only Count 1 of the Complaint  
7 pursuant to Rule 12(b)(6). (*See* Mot. at 1; Mem. at 2.) Becerra opposes (Opp’n), and  
8 Allstate replies (Reply).

## 9 **II. LEGAL STANDARD**

10 A complaint must plead sufficient factual allegations to “state a claim to relief that  
11 is plausible on its face.” *Ashcroft v. Iqbal*, 556 U.S. 662, 678 (2009) (internal quotation  
12 marks and citations omitted). “A claim has facial plausibility when the plaintiff pleads  
13 factual content that allows the court to draw the reasonable inference that the defendant is  
14 liable for the misconduct alleged.” *Id.*

15 A motion to dismiss pursuant to Rule 12(b)(6) tests the legal sufficiency of the  
16 claims asserted in the complaint. Fed. R. Civ. P. 12(b)(6); *Navarro v. Block*, 250 F.3d 729,  
17 731 (9th Cir. 2001). The court must accept all factual allegations pleaded in the complaint  
18 as true and must construe them and draw all reasonable inferences therefrom in favor of  
19 the nonmoving party. *Cahill v. Liberty Mut. Ins. Co.*, 80 F.3d 336, 337–38 (9th Cir. 1996).  
20 To avoid a Rule 12(b)(6) dismissal, a complaint need not contain detailed factual  
21 allegations; rather, it must plead “enough facts to state a claim to relief that is plausible on  
22 its face.” *Bell Atl. Corp. v. Twombly*, 550 U.S. 544, 570 (2007). “[A] formulaic recitation  
23 of a cause of action’s elements will not do.” *Id.* at 545.

## 24 **III. ANALYSIS**

25 Under California law, a contract “is an agreement to do or not to do a certain thing.”  
26 Cal. Civ. Code § 1549. The elements of a claim for breach of contract are (1) existence of  
27 the contract; (2) plaintiff’s performance or excuse for nonperformance; (3) defendant’s  
28

1 breach; and, most important here, (4) damages. *See Wall St. Network, Ltd. v. N.Y. Times*  
2 *Co.*, 164 Cal. App. 4th 1171, 1178 (Cal. Ct. App. 2008).

3 Allstate’s Motion appears to be predicated upon two grounds. First, Allstate argues  
4 that Count 1 is redundant and duplicative of Count 2, and thus the former should be  
5 consolidated into the latter. (*See Reply* at 2, 5–6.) Second, Allstate argues Count 1 fails  
6 as a matter of law because Becerra does not allege any cognizable damages to sustain a  
7 breach of contract claim. (*See Mem.* at 3; *Reply* at 4–5.) Below, the Court addresses both  
8 of Allstate’s arguments in turn.

### 9 **A. Duplicative Claims**

10 Allstate argues the Court should dismiss Count 1 because it is premised upon  
11 substantially the same theory as Count 2: Allstate’s purported unreasonable delay in  
12 providing Becerra with the UM-coverage benefits to which she is entitled under the Policy.  
13 (*Reply* at 5 (“[Becerra’s] allegations in support of her breach of contract claim are the same  
14 as those offered in support of her bad faith claim.”).) In Allstate’s view, these allegations  
15 sound in breach of the implied covenant of good faith and fair dealing—not as breach of  
16 contract—and thus Becerra should be permitted to pursue Count 2 only. (*Id.* at 2, 5.)  
17 Allstate also contends the overlap in allegations supporting Becerra’s two claims further  
18 supports dismissal of the breach of contract claim. (*Id.* at 5–6.). In support of the premise  
19 that district courts may dismiss a breach of contract claim that is practically identical to a  
20 claim for breach of implied covenant alleged in the same pleading, Allstate relies  
21 principally upon *Mason v. Allstate Ins. Co.*, No. SACV 13-01521-JVS, 2014 WL 212245,  
22 at \*3 n.3 (C.D. Cal. Jan. 6, 2014).

23 Same Theory. As an initial matter, the Court disagrees with the notion that Becerra’s  
24 allegation Allstate unreasonably delayed its performance under the Policy, i.e., providing  
25 UM coverage to Becerra over four years after she first submitted a claim following her  
26 2015 accident, resonates solely as a breach of the implied covenant of good faith and fair  
27 dealing. California Civil Code Section 1657 explicitly provides that where, as here, “no  
28 time is specified” in a contract “for the performance of an act required to be performed, a

1 reasonable time is allowed.” Consequently, California courts conceptualize a party’s  
2 unreasonable delay in performing a required act under a contract not only as a breach of  
3 the implied covenant of good faith and fair dealing but also as “an actionable withholding  
4 of benefits that may constitute a breach of contract.” *Intergulf Dev. LLC v. Superior Court*,  
5 183 Cal. App. 4th 16, 20 (Cal. Ct. App. 2010) (citing *Wilson v. 21st Century Ins. Co.*, 42  
6 Cal. 4th 713, 723 (2007)).

7 To the extent Allstate argues that Becerra’s breach of contract claim should be  
8 dismissed because “a delay in the payment of policy benefits cannot salvage a breach of  
9 contract claim where all policy benefits have been paid,” the Court observes this argument  
10 is about whether Plaintiff adequately alleges damages sufficient to state a cause of action,  
11 not about whether Becerra’s theory of breach of contract is a cognizable one. (*See Reply*  
12 *at 2.*) The Court addresses this issue below, *infra* Sec. III.B. However, contrary to  
13 Allstate’s insinuation otherwise, it simply is not the case that a plaintiff who has been paid  
14 all that is owed to her under an agreement is precluded as a matter of law from pursuing a  
15 breach of contract claim on the theory of unreasonable delay. *See Mattson v. United Servs.*  
16 *Auto. Ass’n*, No. 18CV222 JM (KSC), 2019 WL 2330087, at \*16 (S.D. Cal. May 31, 2019)  
17 (“Unreasonable delay in paying policy benefits or paying less than the amount due is  
18 actionable withholding of benefits which may constitute a breach of contract as well as bad  
19 faith giving rise to damages in tort.” (citing *Intergulf Dev.*, 183 Cal. App. 4th at 20));  
20 *Rabinowitz v. Paul Revere Life Ins. Co.*, 91 F. App’x 563, 568 n.1 (9th Cir. 2004) (holding  
21 that despite being paid full benefits, plaintiff has a valid breach of contract claim because  
22 he was not timely paid); *Big Bear Trucking Corp. v. Travelers Prop. Cas. Co. of Am.*, No.  
23 2:19-CV-09745-RGK-GJS, 2020 WL 8175606, at \*7 (C.D. Cal. Nov. 24, 2020) (“[T]he  
24 fact that Travelers paid Big Bear’s claim does not allow Travelers to avoid liability for  
25 breach of contract if it unreasonably delayed that payment.”).

26 Redundant Allegations. As for Allstate’s argument that Becerra’s breach of contract  
27 claim should be dismissed because the claim’s allegations are “duplicative” of the  
28 allegations in her breach of implied covenant claim, the Court finds this argument better

1 suited for a motion to strike under Rule 12(f). *See* Fed. R. Civ. P. 12(f) (“The court may  
2 strike from a pleading . . . any redundant, immaterial, impertinent, or scandalous matter.”).  
3 A Rule 12(f) motion to strike allows a party to challenge needlessly duplicative or  
4 repetitive material in a pleading. *See Wilkerson v. Butler*, 229 F.R.D. 166, 170 (E.D. Cal.  
5 2005) (“A ‘redundant’ matter consists of allegations that constitute a needless repetition of  
6 other averments or which are foreign to the issue to be denied.”). Rule 12(b)(6) is an  
7 improper vehicle for challenging duplicative claims because “[i]n the case of a duplicative  
8 [claim], the issue is not that the [claim] is insufficient to state a cognizable legal theory as  
9 required by Rule 12(b)(6), but rather that the legal and factual issues contained in the  
10 [claim] are redundant with issues already present in the proceeding.” *Fluke Elecs. Corp.*  
11 *v. CorDEX Instruments, Inc.*, No. C12-2082 JLR, 2013 WL 2468846, at \*3 (W.D. Wash.  
12 June 7, 2013).

13 A motion to strike may be granted if “the allegations in the pleading have no possible  
14 relation to the controversy, and may cause prejudice to one of the parties.” *Travelers Cas.*  
15 *& Sur. Co. of Am. v. Dunmore*, No. CIV. S-07-2493 LKK/DAD, 2010 WL 5200940, at \*3  
16 (E.D. Cal. Dec. 15, 2010). Prejudice may include, for example, conducting expensive and  
17 potentially unnecessary and irrelevant discovery, *see Barnes v. AT & T Pension Benefit*  
18 *Plan-Nonbargained Program*, 718 F. Supp. 2d 1167, 1173 (N.D. Cal. 2010), or “[t]he  
19 possibility that issues will be unnecessarily complicated or that superfluous pleadings will  
20 cause the trier of fact to draw unwarranted inferences at trial,” *Ayat v. Societe Air France*,  
21 No. C 06-01574 JSW, 2007 WL 1840923, at \*1 (N.D. Cal. June 27, 2007). “Motions to  
22 strike are generally viewed with disfavor,” *Dunmore*, 2010 WL 5200940 at \*3 (E.D. Cal.  
23 Dec. 15, 2010), and “[c]ourts frequently deny motions to strike where the moving party  
24 cannot adequately demonstrate such prejudice,” *Gunderson LLC v. BCG Props. Grp., Inc.*,  
25 No. 3:19-CV-01569-AC, 2020 WL 1529356, at \*4 (D. Or. Mar. 30, 2020).

26 Allstate’s attempt to dismiss Becerra’s breach of contract claim on the ground that  
27 the claim is duplicative of her breach of implied covenant claim fails to meet the burden of  
28 prejudice required for a Rule 12(f) motion to strike. Allstate is silent as to whether the



1 duplicative nature of Becerra’s breach of contract claim will cause prejudice such as  
2 “conducting expensive, and potentially unnecessary and irrelevant, discovery,” *see*  
3 *Gunderson*, 2020 WL 1529356, at \*4, or “caus[ing] the trier of fact to draw unwarranted  
4 inferences at trial,” *see Ayat*, 2007 WL 1840923, at \*1.

5 Moreover, “courts have noted the distinction between redundant pleading and  
6 alternative pleading in denying Rule 12(f) motions.” *Gunderson*, 2020 WL 1529356, at \*5  
7 (D. Or. Mar. 30, 2020). Under Rule 8(d)(2), “[a] party may set out 2 or more statements  
8 of a claim or defense alternatively or hypothetically, either in a single count or defense or  
9 in separate ones. If a party makes alternative statements, the pleading is sufficient if any  
10 one of them is sufficient.” Put differently, “a party may plead different theories of a claim  
11 when factual or legal issues differ, or when different relief would be available.”  
12 *Gunderson*, 2020 WL 1529356, at \*5 (citing 5C C. Wright & A Miller, Fed. Prac. & Proc.  
13 Civ. § 1382 (3d ed.)). While Becerra’s breach of contract and breach of implied covenant  
14 claims “may be based on similar or even identical facts,” they are not redundant for the  
15 purposes of Rule 12(f) because “they rely on different theories and legal authority and are  
16 subject to different defenses.” *See Shine v. Fuston*, No. 20CV2036-LAB-DEB, 2021 WL  
17 4460885, at \*11 (S.D. Cal. Sept. 29, 2021). Indeed, courts have suggested “the type of  
18 redundancy Rule 12(f) targets is not legal redundancy, but literal redundancy.” *State Farm*  
19 *Gen. Ins. Co. v. ABC Fulfillment Servs., LLC*, No. 1:15-CV00421-KJM-JLT, 2016 WL  
20 159229, at \*2 (E.D. Cal. Jan. 13, 2016).

21 Because Allstate’s arguments fail to form the proper grounds for a Rule 12(b)(6)  
22 motion or meet the burden for a Rule 12(f) motion to strike, the Court declines Allstate’s  
23 invitation to dismiss Becerra’s breach of contract claim on the ground it is redundant or  
24 duplicative.

### 25 **B. Cognizable Damages Under Breach of Contract**

26 Alternatively, Allstate argues that Becerra’s breach of contract claim fails as a matter  
27 of law because she fails to allege “compensable damages under a breach of contract  
28 theory.” (Reply at 4.) Specifically, Allstate avers that Becerra fails to allege cognizable

1 contract damages because she acknowledges she received the full Policy limit. (*See Mem.*  
2 *At 4; Reply at 4.*) Furthermore, Allstate contends that Becerra is precluded by statute from  
3 recovering consequential damages in the form of arbitration expenses. (*See Mem. at 4.*);  
4 *see also* Cal. Civ. Proc. Code § 1284.2.

5 “[T]o support an action at law for breach of contract, the plaintiff must show it has  
6 suffered damage.” *Emerald Bay Cmty. Ass’n. v. Golden Eagle Ins. Corp.*, 130 Cal. App.  
7 4th 1078, 1088 (Cal. Ct. App. 2005). Failure to do so justifies dismissal under Rule  
8 12(b)(6). *See Mason*, 2014 WL 212245 at \*3 (dismissing plaintiff’s breach of contract  
9 claim because plaintiff “failed to adequately plead that he has in fact suffered damages that  
10 are recoverable under a breach of contract theory”); *see also Gardner v. Health Net, Inc.*,  
11 No. CV 10-2140 PA (CWX), 2010 WL 11597979, at \*6 (C.D. Cal. Aug. 12, 2010)  
12 (dismissing plaintiffs’ breach of contract claim because plaintiffs “failed to allege any  
13 cognizable damages”).

14 “Contract damages are generally limited to those within the contemplation of the  
15 parties when the contract was entered into or at least reasonably foreseeable by them at the  
16 time.” *Erlich v. Menezes*, 21 Cal. 4th 543, 550 (1999) (quoting *Applied Equip. Corp. v.*  
17 *Litton Saudi Arabia Ltd.*, 7 Cal. 4th 503, 515 (1994)). Put differently, “[d]amages for  
18 breach of contract include general (or direct) damages, which compensate for the value of  
19 the promised performance, and consequential damages, which are indirect and compensate  
20 for additional losses incurred as a result of the breach.” *Speirs v. BlueFire Ethanol Fuels,*  
21 *Inc.*, 243 Cal. App. 4th 968, 989 (Cal. Ct. App. 2015).

### 22 **1. Direct Damages**

23 Under California law, the measure of direct damages for breach of contract is “the  
24 amount which will compensate the party aggrieved for all the detriment proximately caused  
25 thereby.” Cal. Civ. Code § 3300. Thus, direct damages for a breach of contract claim  
26 cannot, as a matter of law, exceed the value of the promised performance under the contract  
27 by the party in breach. *See Speirs*, 243 Cal. App. 4th at 989 (instructing that direct damages  
28 “compensate for the value of the promised performance”).

1           The Court takes particular note of *Paulson v. State Farm Mutual Automobile*  
2 *Insurance Co.*, 867 F. Supp. 911 (C.D. Cal. 1994), proffered by Allstate. As with Becerra,  
3 the policyholder-plaintiff in *Paulson* alleged that his insurer-defendant’s initial refusal to  
4 pay benefits under his policy constituted a breach of contract, despite the fact that his  
5 insurer ultimately paid the full policy limit following arbitration. *See id.* at 917. The  
6 *Paulson* Court held that the policyholder had failed to show he had suffered any direct, or  
7 general, damages as a matter of law because he had received the full policy limit, albeit  
8 after a purportedly unreasonable delay. *See id.* at 918; *see also Everett v. State Farm Gen.*  
9 *Ins. Co.*, 162 Cal. App. 4th 649, 660 (Cal. Ct. App. 2008) (holding that plaintiff fails to  
10 bring claim for breach of contract because insurer paid up to policy limit as expressly  
11 provided in insured’s policy).

12           As in *Paulson*, Becerra has not suffered any direct damages flowing from breach of  
13 the Policy, as a matter of law, because she explicitly alleges that she has already received  
14 the \$25,000 Policy limit. (*See* Compl. ¶ 17.) That amount represents the maximum value  
15 of Allstate’s performance under the Policy (Policy 31, 58),<sup>3</sup> and thus the maximum amount  
16 of general damages Becerra can recover by this action, *see Speirs*, 243 Cal. App. 4th at 989  
17 (holding general damages equals the value of the promised performance). Becerra cannot,  
18 on the one hand, concede she was paid the full Policy limit and, on the other hand, allege  
19 that she is entitled to recover that amount, for a second time, by this action. That would  
20 result in a complete windfall in favor of Becerra, in contravention of the well-settled rules  
21 on contract damages and California statutory law. *See Benard v. Walkup*, 272 Cal. App.  
22 2d 595, 605 (Cal. Ct. App. 1969) (“[A] person cannot recover damages for breach of a  
23 contract a greater amount than he could have gained by the full performance thereof on  
24 both sides.”); Cal. Civ. Code § 3358 (“Except as expressly provided by statute, no person  
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26           <sup>3</sup> In the section of the Policy addressing UM coverage entitled “Limits of Liability,” the Policy  
27 states that “[t]he coverage limit shown on the Policy Declarations for a) ‘each person’ is the maximum  
28 that [Allstate] will pay for damages arising out of bodily injury to one person in any one motor vehicle  
accident, including all damages sustained by anyone else as a result of that bodily injury.” (Policy at 31;  
*see also id.* at 58.)

1 can recover a greater amount in damages for the breach of an obligation, than he could  
2 have gained by the full performance thereof on both sides.”).

3 Accordingly, because Allstate paid Becerra the Policy limit of \$25,000, the Court  
4 finds that Becerra fails to allege direct damages arising from breach of contract.

## 5 **2. Consequential Damages**

6 Becerra argues correctly that the absence of direct damages does not necessarily  
7 portend dismissal of Count 1. Allstate’s Rule 12(b)(6) challenge fails if Becerra has alleged  
8 cognizable consequential damages. *See Paulson*, 867 F. Supp. at 917–18 (finding “no  
9 damages as a matter of law for breach of contract” because plaintiff failed to allege *both*  
10 direct damages *and* “incidental damages resulting from any alleged breach of contract”).  
11 Therefore, the Court next turns to assessing whether the Complaint adequately alleges  
12 consequential damages flowing from Allstate’s purported breach of contract.

13 Consequential damages comprise “the losses that are foreseeable and proximately  
14 caused by the breach of a contract.” *Lewis Jorge Constr. Mgmt., Inc. v. Pomona Unified*  
15 *Sch. Dist.*, 34 Cal. 4th 960, 969 (2004). The measure of consequential damages for breach  
16 of contract is “the amount . . . which, in the ordinary course of things, would be likely to  
17 result therefrom.” Cal. Civ. Code § 3300. As mentioned above, consequential damages  
18 “compensate for additional losses incurred as a result of the breach.” *Speirs*, 243 Cal. App.  
19 4th at 989.

20 Although Becerra alleges damages exceeding \$25,000 in connection with Count 1,  
21 she does not explicitly allege any consequential damages flowing from Allstate’s purported  
22 breach. (*See* Compl. ¶¶ 22–23.) She alleges “direct” damages only. (*Id.* ¶ 23.)  
23 Nevertheless, relying on *Mattson v. United Services Automobile Ass’n*, No. 18CV222 JM  
24 (KSC), 2019 WL 2330087, at \*1 (S.D. Cal. May 31, 2019), Becerra avers that she has  
25 adequately alleged consequential damages to pass Rule 12(b)(6)’s scrutiny. In *Mattson*,  
26 District Judge Jeffrey T. Miller of the United States District Court for the Southern District  
27 of California concluded that a policyholder-plaintiff similarly situated to Becerra had  
28 adequately alleged breach of contract where the plaintiff alleged consequential damages

1 flowing from the insurer’s failure to timely pay benefits. In particular, the plaintiff alleged  
2 that the insurer’s delay had caused “an increase of her attorney’s fees” and, moreover, “a  
3 loss of [her business] earnings because [she] was required to reschedule client  
4 appointments.” *Id.* at \*17.

5 While *Mattson* supports the proposition that a policyholder can sustain a breach of  
6 contract claim against an insurer for failing to adequately perform under the policy even  
7 where an insurer pays the full policy limit, it simultaneously highlights the deficiency of  
8 Becerra’s pleadings. Unlike the plaintiff in *Mattson*, Becerra’s Complaint is devoid of any  
9 factual information that would enable this Court to decipher what consequential damages  
10 she suffered as a result of Allstate’s alleged breach. Becerra merely alleges that Allstate  
11 unreasonably delayed payment of benefits under the Policy and resolution of her claim and  
12 that she suffered damages exceeding \$25,000 as a “direct” result of that purported breach.  
13 (*See* Compl. ¶¶ 22, 29–31.) Without more, this Court cannot presume that Allstate’s delay  
14 in the payment of Policy benefits caused Becerra economic loss; merely alleging a delay  
15 does not amount to plausible consequential damages. *See Maxwell v. Fire Ins. Exch.*, 60  
16 Cal. App. 4th 1446, 1450 (Cal. Ct. App. 1998) (“[A] delay in paying policy benefits, even  
17 if in an unreasonable manner, does not in itself establish economic loss to the plaintiff.”).

18 Becerra alleges damages from being “forced to retain attorneys and incur substantial  
19 costs and expenses to obtain the policy benefits from [Allstate],” but she does so under  
20 Count 2, not Count 1. (Compl. ¶ 30.) Even if the Court were to attribute this allegation to  
21 both Counts, Becerra’s breach of contract claim would still fail.

22 As an initial matter, Becerra is precluded by statute from recovering fees incurred  
23 during arbitration. *See* Cal. Civ. Proc. Code § 1284.2. California Code of Civil Procedure  
24 Section 1284.2 (“Section 1284.2”) provides:

25 Unless the arbitration agreement otherwise provides or the parties to the  
26 arbitration otherwise agree, each party to the arbitration shall pay his pro rata  
27 share of the expenses and fees of the neutral arbitrator, together with other  
28 expenses of the arbitration incurred or approved by the neutral arbitrator, not

1 including counsel fees or witness fees or other expenses incurred by a party  
2 for his own benefit.

3 California courts have interpreted this statute to mean that parties who participate in UM  
4 arbitration proceedings are “not entitled to the costs . . . incurred in arbitration,” absent a  
5 provision in the insurance policy providing otherwise. *Austin v. Allstate Ins. Co.*, 16 Cal.  
6 App. 4th 1812, 1817 (Cal. Ct. App. 1993); *see also Mason*, 2014 WL 212245, at \*3 (“While  
7 California law does permit a plaintiff to recover attorneys’ fees for bad faith claims against  
8 insurers, no similar rule extends to insurance breach of contract cases.”).

9 The Policy here explicitly requires Becerra to cover her own attorney’s fees and fees  
10 paid towards medical or other expert witnesses in connection with arbitration. (*See* Policy  
11 at 44 (“All expenses of arbitration will be shared equally. However, attorney fees and fees  
12 paid to medical or other expert witnesses are not considered arbitration expenses and are  
13 to be paid by the party incurring them.”).) Thus, to the extent Becerra alleges she is entitled  
14 to consequential damages attributable to fees she incurred during arbitration, those  
15 damages are not cognizable in this context.

16 To the extent Becerra alleges Allstate caused her to incur other “costs and expenses”  
17 arising out of arbitration besides attorneys’ and medical experts’ fees, the Complaint does  
18 not enable this Court to determine what those other “costs and expenses” are. Put simply,  
19 more is needed for this Court to draw a plausible inference in Becerra’s favor. *See*  
20 *Maxwell*, 60 Cal. App. 4th at 1450 (“[A] delay in paying policy benefits, even if in an  
21 unreasonable manner, does not in itself establish economic loss to the plaintiff.”).

22 Accordingly, the Complaint also does not adequately allege cognizable, consequential  
23 damages. Because Becerra fails to allege cognizable damages, the Court finds that Becerra  
24 fails to state a claim for breach of contract. *See Mason*, 2014 WL 212245 at \*3.


#### 25 **IV. CONCLUSION**

26 For the foregoing reasons, the Court **GRANTS** the Motion and **DISMISSES**  
27 **without prejudice** Count 1. If Becerra chooses to amend her complaint to address the  
28 deficiencies outlined in this order, she must do so **by no later than July 21, 2022**. If no

1 amended complaint is filed by July 21, 2022, Allstate's answer to the complaint is **due by**  
2 **July 28, 2022.**

3 **IT IS SO ORDERED.**

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5 **DATED: June 30, 2022**

6   
7 **Hon. Cynthia Bashant**  
8 **United States District Judge**

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